

TPW 1654 \$/cc

PTO/SB/17 (11-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 01/01/2004. Patent fees are subject to annual revision.

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 55.00)

Complete if Known

Application Number	09/845,923
Filing Date	04/30/01
First Named Inventor	Patrick Kennedy
Examiner Name	Patricia Leith
Art Unit	1654
Attorney Docket No.	1022-11

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order

☒ Deposit Account ☐ None

Deposit Account Number
50-2828

Deposit Account Name
Jack Schwartz

The Director is hereby authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below
- ☐ Charge fee(s) indicated below, **except for the filing fee**
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
- ☐ Credit any overpayments

to the above-identified deposit account.

☐ Other (please identify):

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING FEE

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid(\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	

Subtotal (1) \$

FEE CALCULATION (continued)

2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**
9 - 20 or HP = $\frac{9}{20} \times 300 = 135$
HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**
- 3 or HP = $\frac{1}{3} \times 88 = 29.33$
HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims **Fee (\$)** **Fee Paid (\$)**

Subtotal (2) \$

3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid(\$)
1-month extension of time	110	55	55.00
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
Other:			

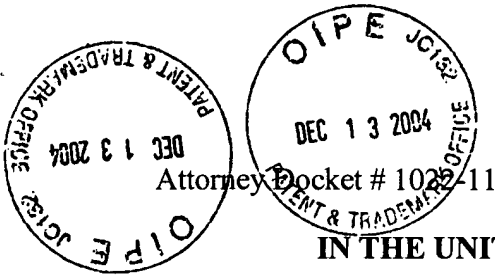
Subtotal (3) \$

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	34,721	Telephone	(212) 971-0416
Name (Print/Type)	Jack Schwartz	Date	12/09/04		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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09/845,923

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Patrick Kennedy

Examiner: Patricia A. Leith

Serial No.: 09/845,923

Group Art Unit: 1651

Filed: 30 April 2001

**Title: PHARMACEUTICAL COMPOSITION
AND METHOD FOR RELIEVING ITCH, PAIN
AND SWELLING RESULTING FROM INSECT
BITES AND STINGS**

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

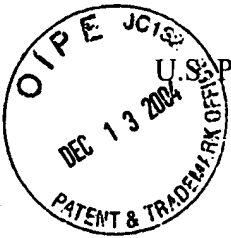
In response to the office action dated August 12, 2004, no paper number , in the subject patent application, for which a response is due on November 12, 2004, and for which a one-month extension of time until December 12, 2004 is hereby respectfully requested, the following comments are submitted and reconsideration of the claim rejections is respectfully requested.

Please charge the fee of fifty five dollars (\$55.00) due under 37 CFR 1.17(a)(1) for a one month extension of time to the credit card indicated on the attached Credit Card Authorization Sheet. Applicant respectfully submits that no other fee is due in this application.

The Applicants submit that in view of the attached Certificate of Mailing, this response is timely.

Listing/Amendment to the claims begin on page 2 of this response.

Remarks begin on page 9 of this response.



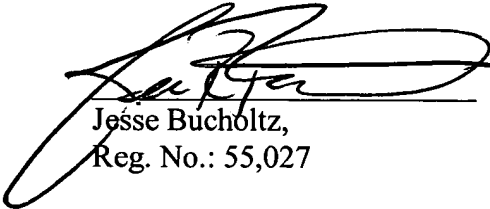
U.S. Patent Application No.: 09/845,923

CERTIFICATE OF MAILING

I hereby certify that this amendment is being deposited with the United States Postal Service as First Class Mail, postage prepaid, in an envelope addressed to the Mail Stop Amendment, Commissioners for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

December 9, 2004

Date



Jesse Bucholtz,
Reg. No.: 55,027